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State of Nebraska
Investigator's Motor Vehicle Accident Report

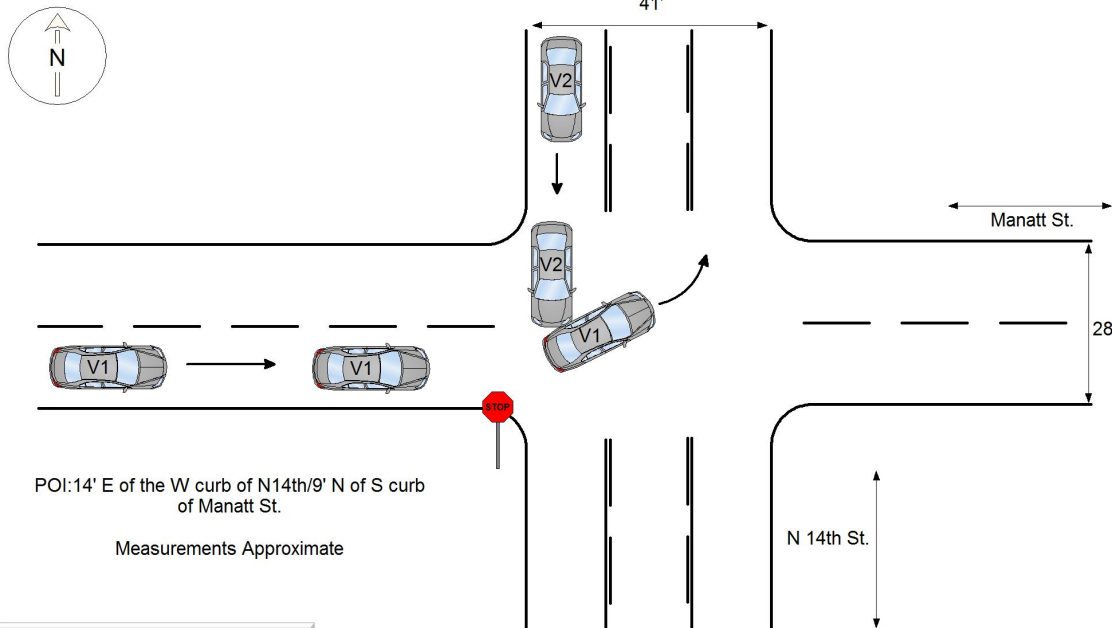
Sheet 1 of 2

2	Total Number of Vehicles	Local No./ District 127	Agency Case No. B3-115788	HIT & RUN? <input type="radio"/> YES <input checked="" type="radio"/> NO	INVESTIGATION MADE AT SCENE? <input checked="" type="radio"/> YES <input type="radio"/> NO	L 1
A/1	DATE OF ACCIDENT	M M / D D / Y Y Y Y S M T W T H F S 12/16/2013		TIME OF ACCIDENT 1807	STATE USE ONLY	
A/2	PLACE OF ACCIDENT	COUNTY Lancaster	CITY Lincoln	POLICE NOTIFIED 1807	12/17/2013	
B	40	ROAD ON WHICH ACCIDENT OCCURRED STREET/ HIGHWAY NO. N 14th St./Manatt		PRIVATE PROPERTY? <input type="radio"/> YES <input checked="" type="radio"/> NO	LATITUDE	
C	4	DISTANCE FROM MILEPOST	FEET	N S E W OF MILEPOST	HIGHWAY NO.	LONGITUDE
D	1	IF AT INTERSECTION NAME OF INTERSECTING ROADWAY N 14th/Manatt		IF NOT AT INTERSECTION NAME OF NEAREST STREET, BRIDGE, RAILROAD CROSSING		
V1/M	02	IF ACCIDENT WAS OUTSIDE CITY LIMITS, INDICATE DISTANCE FROM NEAREST TOWN				
V2/M	01	MILES	N S E W	AND MILES	N S E W	OF NEAREST CITY OR TOWN
E	1	R. WORK ZONE CODES R1 R2 R3 R4 1	S. PEDESTRIAN CLASSIFICATION CODES S1 S2 S3 S4 S5-a S5-b S6-a S6-b		DOES ACCIDENT INVOLVE DAMAGE TO STATE DEPT. OF ROADS' PROPERTY? <input type="radio"/> YES <input checked="" type="radio"/> NO	
VEHICLE NO. 1						
F	1	DRIVER LICENSE NO.	G02143932		STATE (Of License)	NE
V1/N	5	DRIVER	LYNNE J HAHN		PHONE	402-477-1958
V2/N	1	DRIVER ADDRESS	231 W CHADDERTON DR, LINCOLN, NE 68521		DATE OF BIRTH (MM / DD / YYYY)	11/21/1956
G	3	OWNER	Lynne J HAHN / Gregory E Hahn		PHONE	4024771958
H	5	OWNER ADDRESS	231 W Chadderton Dr, Lincoln, NE 68521		CITATION <input checked="" type="radio"/> YES <input type="radio"/> NO	CITATION NO. LB378213
V1/O	3	LICENSE PLATE PA NO.	TAL303		YEAR (Plate Expires)	2013
V2/O	3	VEHICLE	2004	Make Ford	MODEL Taurus	BODY STYLE 4 door Sedan
I	1	VEHICLE ID NO. (VIN)	1FAFP55U14G105373		COLOR white	ESTIMATED DAMAGE <input type="radio"/> TOALED \$ 2500
J	01	TOWED TO	4201 Industrial Ave		TOWED BY Stevenson Truck Repair	POLICY NO. 2615-0700-21-62-FPPA-NE
VEHICLE NO. 2						
F	1	DRIVER LICENSE NO.	H13252947		STATE (Of License)	NE
V1/P	1	DRIVER	KAYLA E BUSBOOM		PHONE	402-239-8681
V2/P	1	DRIVER ADDRESS	15481 S 12TH RD, PICKRELL, NE 68422		DATE OF BIRTH (MM / DD / YYYY)	09/20/1992
J	01	OWNER	KAYLA E BUSBOOM		PHONE	402-239-8681
K	02	OWNER ADDRESS	15481 S 12th Rd, Pickrell, NE 68422		CITATION <input type="radio"/> YES <input checked="" type="radio"/> NO	CITATION NO.
V1/Q	1	LICENSE PLATE PA NO.	3B1548		YEAR (Plate Expires)	2014
V2/Q	1	VEHICLE	2008	Make Ford	MODEL Fusion	BODY STYLE 4 door Sedan
V2/R	02	VEHICLE ID NO. (VIN)	3FAHP07Z78R242921		COLOR black	ESTIMATED DAMAGE <input checked="" type="radio"/> TOALED \$
V2/S	02	TOWED TO	Capital Towing		TOWED BY Capital Towing	POLICY NO. 0508889-B15-27-C
Complete this section for all injured persons (Complete a continuation report, if more than three were injured)						
VEH. #	NAME	ADDRESS	DATE OF BIRTH (MM / DD / YYYY)	1 Seat Position	2 Eject	3 Body Region
VEH. #	NAME	ADDRESS	DATE OF BIRTH (MM / DD / YYYY)	4 Injury Sev.	5 Trans.	SEX M F
VEH. #	NAME	ADDRESS	DATE OF BIRTH (MM / DD / YYYY)	1 Seat Position	2 Eject	3 Body Region
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VEH. #	NAME	ADDRESS	DATE OF BIRTH (MM / DD / YYYY)	4 Injury Sev.	5 Trans.	SEX M F

THE FOLLOWING INFORMATION IS REQUIRED FOR ALL ACCIDENTS

INDICATE BY DIAGRAM WHAT HAPPENED

AGENCY CASE NO.
B3-115788



Not To Scale

DESCRIPTION OF ACCIDENT BASED ON OFFICER'S INVESTIGATION

V1 was EB on Manatt approaching N 14th St. and then turned NB onto N 14th. V2 was SB on N 14th approaching Manatt at approx 30 MPH heading straight through the intersection. D1 stated that she stopped at the stop sign at 14th/Manatt and then began to turn NB onto N 14th St. without seeing V2. D2 stated that as she was SB approaching Manatt St. she noticed V1 pull out in front of her forcing her to slam on her brakes and steer to the right. V2 was unable to avoid the collision and struck V1 at the intersection.

PROPERTY	OBJECT DAMAGED	OWNER NAME	ADDRESS	PHONE	APPROX. COST OF DAMAGE \$
	OBJECT DAMAGED	OWNER NAME	ADDRESS	PHONE	APPROX. COST OF DAMAGE \$
WITNESSES	NAME ADDRESS PHONE				
	NAME ADDRESS PHONE				

VEHICLE MOVEMENT BEFORE COLLISION				POINT OF IMPACT AND MOST DAMAGED AREA (Enter numbers for each vehicle)				AIRBAG DEPLOYED VEHICLE 1		RESTRAINT USE VEHICLE 1		TOTAL OCCUPANTS			
VEH NO.	N	S	E	W	ROAD OR HIGHWAY NAME										
1			X		Manatt St										
2	X				N 14th St.										
1	06	06 Turning left				VEHICLE 1		VEHICLE 2		1		2		3	
2	01	08 Entering traffic lane				POINT OF IMPACT 07		POINT OF IMPACT 08		4		2		1	
		09 Leaving traffic lane				MOST DAMAGED AREA 07		MOST DAMAGED AREA 08		2		1		1	
		10 Parked				00 None		01 02 03 04		1 None used - vehicle occupant		2 Lap & shoulder belt used		Driver No. 1 1	
		11 Slowing or stopped in traffic				09 Top & windows		05 06 07 08		2 Lap & shoulder belt used		3 Shoulder belt only used		Driver No. 2 1	
		12 Other				10 Undercarriage				3 Shoulder belt only used		4 Lap belt only used			
		13 Unknown				11 Total (all areas)				4 Lap belt only used		5 Child safety seat used			
						12 Other				5 Child safety seat used		6 Child booster seat used			
										6 Child booster seat used		7 DOT approved helmet used			
										7 DOT approved helmet used		8 Costume helmet used			
										8 Costume helmet used		9 Restraint use unknown			
										9 Restraint use unknown					

OFFICER NO. 1713	TROOP/ TEAM/ BEAT	DEPARTMENT Lincoln Police Department	Photographs taken? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
INVESTIGATOR NAME (Print or Type) Matthew Eliker		INVESTIGATOR SIGNATURE Approved by Officer Matt Eliker	
DATE OF REPORT 12/17/2013			